



FLATHEAD COUNTY PARKS AND RECREATION

MAILING/PHYSICAL ADDRESS – 309 FFA Drive ~ Kalispell, MT 59901
(406) 758-5800 (FAX: 758-5888)

Jackson Hewitt & Coca Cola Youth Flag Football Boys & Girls Grades 1 – 4



HEY KIDS! If you like to play flag football, Flathead County Parks & Recreation, along with Coca Cola and Jackson Hewitt Tax Service, is offering programs for boys and girls grades 1-4. Participants play in every game and will receive a T-shirt and a certificate. Pictures will be available. You will learn fair play, sportsmanship, team work and have a fun positive experience doing it! Practices are scheduled to start early September and the season runs through October. All practices/games are held at the Conrad Complex. Players are separated into two leagues:

Jackson Hewitt Pee Wee League \$34 – 1st & 2nd graders. Games are played on Saturdays only.
Coca Cola 3rd & 4th Grade League \$43 – 3rd & 4th graders. Games are played on Tuesday and Thursday evenings.

REGISTRATION RUNS THROUGH SEPTEMBER 10, 2009. Registrations must be received at the above address by September 10, 2009. We **CAN NOT** guarantee that we can honor requests. Players are placed on teams based on school affiliation and date of application being received in our office. We reserve the right to cancel this program if the minimum number of players required is not met. Checks should be made payable to Flathead County Parks and Recreation. An administration fee of \$10 will be assessed on all refunds and NO refunds after the first game played.

(Please print)

Player's Name: _____ Phone: _____

Mailing Address: _____ City: _____ Zip: _____

Shirt Size (circle one) Youth Small Youth Medium Youth Large Small Adult Medium Adult

School _____ Football Experience _____ (yrs) Grade: _____

Name of Parent/Guardian _____ Phone: _____

Parents: Does your child have any medical problems: _____ No _____ Yes (if yes, please explain) _____

I, as a parent/guardian of _____, hereby agree to abide by all the rules and regulations set up by the Youth Flag Football League, administered by Flathead County Parks and Recreation. I further agree to accept complete responsibility in matters of any physical injury or loss that might result from participation in games, practices, or travel to or from such activity. I further agree that in the event of such injury or loss, there shall be no liability on the part of the Flathead County Parks and Recreation Department, or any of its sponsoring bodies or any group, individual, or agency associated in the sponsorship of this activity.

Date: _____ Parent/Guardian Signature: _____

A SPECIAL NOTE TO PARENTS: These flag football leagues are very special youth programs. We encourage you to participate, become involved as a coach, assistant coach, or referee. Your role as a parent is important - make it a meaningful experience for you and your child. Please select a volunteer position complete the information on the reverse side of this form if you are interested in helping. This new volunteer policy has been introduced to ensure the safety of everyone involved.

Coach: _____ Assistant Coach: _____ Referee: _____

OFFICE USE ONLY:

Date _____ Amount _____ Check _____ Cash _____ Sch _____ By _____

Form #YFF 2009

Volunteer Enrollment & Release for Criminal Background Check

Name: _____

Phone Number: _____

_____ Coach

_____ Assistant Coach

_____ Referee

☐ **Check this box to indicate that you have submitted a background check with this department within the last 2 years. If you check this box, you are not required to complete the remainder of this form.**

To Whom It May Concern

I have applied for a volunteer position with the Flathead County Parks & Recreation Department as a coach, assistant coach, referee and/or hall monitor. In connection with that application, I hereby authorize the Flathead County to obtain any records available which refer to my criminal history.

I hereby authorize any person or agency which receives this release from the Flathead County, to release any information concerning me that is maintained in said person(s) or agency(s) files including information of a confidential or privileged nature. I hereby release any person or agency which releases such information to the Flathead County, and the Flathead County from any liability or damage which may result from furnishing the information requested.

Please furnish any information concerning the below named individual to the following address:

Flathead County Human Resource Office
800 South Main
Kalispell, MT 59901

Applicant's Signature

Date Signed

Printed Name

Social Security Number

Street Address

City State Zip

Place of Birth (City/County/State)

Date of Birth

Driver's License Number/State